ORDINANCE/RESOLUTION REQUEST

				Date of Request: 10/03/2012
Please mark one:	⊠ Bill Request	or	☐ Resolution Requ	est
1. Has your agency su	bmitted this request in	the last 12	2 months?	
☐ Yes	⊠ No			
If yes, please ex	plain:			
				act, through contract number SOCSV-2011- ss individuals through the Shelter Plus Care-
Colorado Coaliti 2111 Champa St Denver, CO 802				
3. Requesting Agency:	DDHS			
4. Contact Person: Name: Ron Mi Phone: 720-94 Email: ron.mit				
5. Contact Person: Name: Ron Mi Phone: 720-94 Email: ron.mit				
6. General description of proposed ordinance including contract scope of work if applicable:				
individuals receive educa	tional and financial mana substance abuse issues an	gement and contribution	ssistance through the over ute a portion of any income	duals with substance abuse issues. The erall program, and must be enrolled in treatment me to the costs for their housing. The ultimate
The women in this prograssistance with obtainin		ESL and t	financial management o	classes in addition to case management
a. Contract C	ontrol Number: SOCSV	7-2011-00	0413-01	
	2-01-2012 through 11/30	0/2013		
	helter Plus Care-Durkin			
	ouncil District: All lelp homeless people second	ura narma	onant housing	
	,592, entirely funded thro	_	=	
7. Is there any controv	versy surrounding this o	ordinance	e? Please explain. None	
	To be	completed	d by Mayor's Legislative	Team:
SIRE Tracking Number:			Dat	e Entered: